PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) VICTORY POLITICAL ACTION COMMITTEE P. O. BOX 3571 ADDRESS (number and street) (Check if address is changed) SEMINOLE 33775 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mlettelleir@gmail.com (Check if address is changed) Optional Second E-Mail Address paulb@theflcpa.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2015 C00344374 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Paul Bedinghaus Type or Print Name of Treasurer Paul Bedinghaus [Electronically Filed] 03 20 2015 Signature of Treasurer Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
Offig			Local 202-694-1100

	EEO <b>F</b> a	**** 1 (Paying 02/2000)	Pogo 9
		rm 1 (Revised 02/2009) OMMITTEE	Page 2
		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.	)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FFC Form 1	(Revised 02/2009)	Page <b>3</b>
Write or Type Commit		i age 🗸
	POLITICAL ACTION COMMITTEE	
		adarahin DAC Spanaar
-	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
_		
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person .	in possession of committee
ا ِ	Paul Bedinghaus	
Full Name	9050 Day 20 44	
Mailing Address	2358 Drew Street	
	Clearwater FL 33	8765 
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 727	-   461  -   1133
	name and address (phone number optional) of the treasurer of the committee; and tent (e.g., assistant treasurer).	he name and address of
Full Name F of Treasurer	Paul Bedinghaus	
Mailing Address	2358 Drew Street	
	Clearwater FL 33	765
Title B '''	CITY STATE	ZIP CODE
Title or Position Treasurer	727 Telephone number	- 461 - 1133

	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Mark Barber	
-	100 North Tampa Street	
Mailing Address	Suite 3500	
	Tampa , FL , 33602	
Title or Position	CITY STATE Z	ZIP CODE
Attorney		25   -   3020
safety deposit be	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.	accounts, rents
	Depository etc	
Name of Bank,	Depository, etc.	
Name of Bank,	⊔Wells Fargo Bank	
	Wells Fargo Bank	
Name of Bank,  Mailing Address	Wells Fargo Bank	
	Wells Fargo Bank	
	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA 94104	ZIP CODE
	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA  94104  CITY  STATE	ZIP CODE
Mailing Address	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA  94104  CITY  STATE	ZIP CODE
Mailing Address	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA 94104  CITY STATE 2	ZIP CODE
Mailing Address  Name of Bank,	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA 94104  CITY STATE 2	ZIP CODE
Mailing Address  Name of Bank,	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA 94104  CITY STATE 2	ZIP CODE
Mailing Address  Name of Bank,	Wells Fargo Bank  420 Montgomery Street  San Francisco  CA 94104  CITY STATE  Depository, etc.	ZIP CODE